# VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N
Supervisor/Operator Performing the Verification Procedure:  Name    Date   3   1   1   1   1   1   1   1   1   1
Name AM AMCRESSON ID# 076 Date 000
A Agency Seldovia Palice Dept. Phone #
Instrument Location Seldovia Talice Rept.
Alco S/N X301530 \ Target Value \ 078 \ High Pressure \ \( \sigma \text{PS} \)
Alco Test Values 1st Alco 2na Alco
Signature AW Andust
(OVER)
(Do Not write in the grea below)

I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

(1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.

(2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.

(3) I am the Scientific Director of the State Breath Alcohol Program.

(4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.

(5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.

day of MAR, 2010.

nstrument is certified for evidentiary use in the State of Alaska. The reference

Scientific Director

State Breath Alcohol Program

Subscribed and sworn before me this

(Notary Seal Stamp)

Daniel L. Nicholas

Notary Public, State of Alaska Commission Expires with Office





# **VERIFICATION OF CALIBRATION REPORT**

of DataMaster cdm breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N

130180

## (CONTINUED FROM FRONT PAGE)

 $\mathbf{C}$ 

TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

# NONDRINKING SUBJECT TEST

PLASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER color 130138

FEBRUARY 23, 2011

OPERATOR'S HOME:

ANDERSON AN
PREKATOR'S MUMBER: 2467
SUBJECT'S LAST NAME:
SIXTY DAY VERIFICATION

SUBJECT'S FIRST HATE/MI:

0.L. #: 1234567998 CEPT/AGENCY: SOUL

CASE/PEPORT: N/A TEST TYPE: U

ALCO TARSET VALUE: .878 ALCO S/H: X301530

### -- EREATH CHALLYSIS ---

.078 ADJUSTED FOR 31.83 in ALCO TARGET .08 11:53 BLANK TEST 11:54 INTERNAL STREET, AND STORY TO THE STORY AND ST VERIFIED 11:54 11:55 11:55 .078 .000 REJECT SAMPLE BLANK TEST .000 11:56 11:57 11:57 , 100 9LCO TV 31.03 in .078 BLANK TEST 11:58 200

### DIAGNOSTIC CHECK

GLASKA DEPARTMENT OF PUBLIC SAFETY DATAMASTER cdm 178180

FEBRUARY 23, 2011 TIME 11:51

-- DIAGNOSTIC CHECK ---

COMPUTER:

OXAY

PROGRAM:

CKAY

SOFTWARE DATE:

02/20/01

HEATERS

SAMPLE CHAMEER: BREATH TUBE: 49c 41c

BAROVETER:

31.83 in

FLOW DETECTOR:

OKAY

PUMP

HIGH SPEED:

OKAY

OFFECTOR:

OKAY

FILTERS:

OKAY

QUARTZ STANOARD:

OVOV

CALIERATION:

460011 AV611 -

OKAY

PRINTER TEST
!"##X&\*()\*+:-./0123456789:5<=>?@NECDEF6
HIJXLMNOPORSTUMMYZ[\]^\_\*abode\*shijklano
perstummyz[]?##